| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | *dp* | | 08-30-01 |
| O.I.P.E. CLASSIFIER | | 10 | 9-7-01 |
| FORMALITY REVIEW | *clyfl* | 1144 | 10-4-01 |
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| | | | |

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| = | .............................. Allowed | I | .............................. Interference |
| − | (Through numeral)... Canceled | A | .............................. Appeal |
| ÷ | .............................. Restricted | O | .............................. Objected |

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**If more than 150 claims or 10 actions
staple additional sheet here**

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